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1.0 BACKGROUND AND PURPOSE

These Program Specifications were developed by a working group which included representatives from the Massachusetts Department of Public Health, the Massachusetts Department of Education, the Suffolk County Juvenile Court Probation Department, and certified batterer intervention programs. The Department of Social Services and Jane Doe, Inc., (formerly the Massachusetts Coalition of Battered Women's Service Groups) also contributed to the development process.

The purpose of these Program Specifications is to establish guidelines for creating and operating intervention programs for adolescent males who perpetrate abuse against dating partners, female relatives, and female household members. For the purposes of these Program Specifications, such abuse is considered a component of "dating/domestic violence."

2.0 DEFINITION OF DATING/DOMESTIC VIOLENCE

The definition of adolescent dating/domestic violence shall be understood as follows:

- A. "Adolescent" is defined as an individual who is 11-18 years old.
- B. "Dating" is defined as a relationship between individuals which has or has ever had any romantic or sexual aspects, whether those aspects are desired or apparent to the individuals involved.
- C. "Dating/Domestic Violence" is defined as any act of emotional, verbal, sexual or physical aggression or abuse.
- D. "Abuse" is defined as a pattern of coercive control directed toward a victim(s). Abuse may consist of one or more of the following behavioral elements:
 - 1) physical assault
 - 2) verbal and emotional forms of assault and control such as intimidation, coercion, threats, isolation or degradation
 - 3) economic forms of control such as taking, withholding or denying access to money, employment or other basic resources, sabotaging employment, housing or educational opportunities
 - 4) sexual assault or coercion

- 5) social isolation such as possessiveness, jealousy, denying communication with friends or family, prohibiting access to transportation and/or telephone
- 6) stalking, harassing and on-going monitoring and/or pursuing of victim
- E. There is no behavior on the part of the victim which causes or excuses abuse. The perpetrator bears sole responsibility for his actions.
- F. Substance abuse or psychopathology do not diminish responsibility for violence.

2.1 **DEFINITION OF VICTIMS**

For the purposes of these Program Specifications, "victims" may refer to dating partners or females subjected to verbal, physical, emotional or sexual abuse or harassment by an adolescent male.

2.2 DEFINITION OF TARGET POPULATION

- A. An adolescent male will be considered appropriate for intervention services if he is between 11 and 18 years of age, and if he:
 - 1) has a 209A restraining order against him; or
 - 2) has used a pattern of controlling behaviors, or perpetrated an act of violence or abuse on a dating partner and/or female victim.

PROGRAM ADMINISTRATION

3.0 ADMINISTRATIVE OVERVIEW

- A. Each program shall establish linkages with agencies providing services to battered women, certified batterer intervention programs, courts and juvenile probation departments, and schools. Section 3.1 of this document describes the nature of these linkages in more detail.
- B. Each program shall hire or contract consultants to provide the following services: program administration, clinical supervision, group facilitation, case management, and parent outreach.

- C. The program shall provide ongoing staff training and regular, clinical supervision of group facilitators. Supervision shall be provided once a week for a minimum of 45 minutes by a supervisor meeting all qualifications as specified in Section 3.3.
- D. Programs shall provide ongoing training for group facilitators on sexism, racism, child abuse and neglect, homophobia, disabilities and other factors that impact violent attitudes and behaviors.
- E. Programs shall have bilingual or multi-lingual staff or provide language translation services to allow individuals who are not proficient in English to participate in group sessions. It is not appropriate for adolescents to translate for one another.
- F. Adolescent perpetrator intervention programs shall comply with Title III of the Americans with Disability Act and other federal and state non-discrimination laws. Programs shall provide programmatic access to all persons, including persons who are physically challenged and other persons with disabilities. Programs shall provide communication access for the deaf and hard of hearing and the blind and visually impaired. Programs are encouraged to establish systems for timely access to ASL translators so that those in need of ASL translation can start group sessions without undue delay. Programs shall complete and submit to the Department of Public Health the MDPH ADA Checklist and copies of their access policies for serving individuals with disabilities.
- G. Programs shall establish safeguards for ensuring the security of information and for protecting personal identifiers of program participants.
- H. Programs shall have clearly defined policies regarding obligations for mandated reporting of: cases of injured, abused, or neglected children to the Department of Social Services under G.L. c.119s. 51A; cases of elder abuse of persons age 60 or over to the Department of Elder Affairs under G.L. c.19A s.15; and cases of abuse of disabled persons between ages 18 and 59 to the Disabled Persons Protection Board under G.L. c.19c s.10.
- I. Programs shall have clearly defined policies regarding the filing of 51As and contact with the Department of Social Services.

3.1 PROGRAM LINKAGES

- A. Community Task Force:
 - 1) Programs must establish and/or participate in a community task force dedicated to dating/domestic violence issues. The purpose of the Community Task Force is to focus attention on the delivery of intervention services, conduct on-going process evaluation, set goals for the intervention services, discuss funding options, address gaps in services, strengthen linkages between providers, and provide the community with legislative and training updates. Community Task Force meetings are not to be used for case conferencing. It is prohibited for Community Task Force members to discuss individual adolescents or reveal the names of program participants during meetings. The adolescent perpetrator intervention program director must attend the Community Task Force meetings regularly.
 - 2) Community Task Forces should include representatives from:
 - a) the Department of Social Services
 - b) juvenile probation
 - c) district attorney's office
 - d) victim witness programs
 - e) sexual assault programs
 - f) schools
 - g) battered women's shelters and agencies
 - h) certified batterer intervention programs, and
 - i) the Department of Youth Services.
 - 3) Additionally, programs are strongly encouraged to invite representatives from the following agencies to Community Task Force meetings:
 - a) police
 - b) substance abuse programs
 - c) mental health agencies
 - d) student organizations
 - e) coaches
 - f) hospitals
 - g) community centers
 - h) community health centers
 - i) Boys/Girls Club or YMCA/YWCA
 - j) churches or other religious organizations
 - k) parents.

- 4) At a minimum, Community Task Forces meetings must be convened monthly.
- 5) Community Task Force meeting minutes should be kept on file and made available to representatives of the Department of Public Health during site visits. In addition, the Department of Public Health may request to review all documents regarding agencies' intention to participate in the Community Task Force.
- 6) The topic of providing victims with resources and services must be the focus of at least one Community Task Force meeting per year.
- B. The program must have linkages with other service providers so that appropriate, allied referrals can be made. (For example, adolescents may be referred to substance abuse treatment or mental health counseling while simultaneously undergoing intervention for perpetration of dating/domestic violence.)
- C. The program director is responsible for ensuring that the following be reported to juvenile probation department, when applicable, in a timely manner:
 - 1) adolescent's acceptance/non-acceptance into the program
 - 2) adolescent's service plan, developed after evaluation
 - 3) the group rules and a copy of the adolescent's signed agreement with the program
 - 4) monthly reports regarding the adolescent's attendance and cooperation
 - 5) a notice that the adolescent has been discharged from the program
 - any renewed acts of violence or controlling behavior
 - 7) all absences from group sessions
 - 8) successful completion of the program.

3.2 HIRING PROGRAM STAFF

- A. Staff employed or contracted by the adolescent perpetrator intervention program must be violence free in their own lives. No program shall hire an individual who has been a perpetrator of dating or domestic violence (as defined in Section 2.0) unless the program director is satisfied that the potential staff member has successfully completed a certified batterer intervention program and has remained violence free in his/her life for a period of three (3) years. An individual hired by an adolescent perpetrator intervention program who has been a perpetrator of dating/domestic violence but has not completed a batterer intervention program shall be violence free in his/her life for a period of seven (7) consecutive years prior to being hired.
- B. In hiring new staff or contractors or assigning current staff to be group leaders, programs shall ask applicants about abusive and controlling behaviors they have used in their relationships. In making this inquiry, it is recommended that applicants be asked to review a comprehensive list of abusive behaviors.
- C. Staff members and contractors employed by the program shall have a background which is free of conduct which bears adversely on his/her ability to provide required services. Staff shall not have engaged in conduct resulting in a criminal conviction included in a relevant CORI (Criminal Offender Record Information) report (see G.L. c.6 §167-178), or any other conduct, criminal or otherwise, deemed to impair the individual's ability to provide services. Persons who are registered sex offenders or currently subject to a restraining order are not permitted to conduct adolescent perpetrator intervention groups.
- D. Programs shall provide an orientation for all new employees and contractors to acquaint them with the program's philosophy, organization, intervention methodology, policies, procedures and goals.
- E. Programs shall have staff who are reflective of ethnic and linguistic minorities within the communities served. Programs shall be linguistically accessible and culturally appropriate to communities of color in the geographic areas served.

3.3 MINIMUM QUALIFICATIONS FOR PROGRAM STAFF

All persons providing intervention with adolescent perpetrators of dating/domestic violence must meet the following criteria:

A. Supervisors:

- All supervisory personnel shall have training and at least three years of direct clinical experience with perpetrators of dating or domestic violence and victims of dating or domestic violence where violence is the focus of the intervention. This training and experience cannot be indirect or incidental. (For example, a clinician who treats gamblers who also happen to be batterers would not be considered as having had direct experience working with perpetrators of dating or domestic violence.) Supervisory personnel shall also have training and experience working with adolescents. The Department of Public Health reserves the right to interview the program supervisor before hire and thereafter to ensure that the program has the capacity to administer and supervise the program appropriately for compliance with these Program Specifications and victim safety.
- 2) Programs shall provide supervisory staff or access to outside consultants who are knowledgeable about psychiatric problems, substance abuse problems, post-traumatic stress disorder (PTSD), suicidal and homicidal ideation as they apply to adolescents.

B. Program Directors, Clinical Supervisors, Group Facilitators and Parent Outreach Workers:

- Each staff person or contractor shall have successfully completed a minimum of 24 hours of training in batterer intervention from a DPH-approved batterer intervention training program before he/she is hired. In addition to the 24 hours of batterer intervention training, each group facilitator shall observe at least six (6) batterer intervention group sessions led by staff from a DPH-approved training program before he/she is hired.
- 2) In addition to the training requirements outlined in Section 3.3.B.1, each staff person shall undergo sixteen hours of DPH-approved training in adolescent perpetrator intervention before he/she is hired. In addition, each group facilitator shall spend a period of 12 hours, or the lifecycle of one group, being mentored by a more experienced facilitator at his/her program.
- 3) Staff employed by the adolescent perpetrator intervention program must not use alcohol or prescription drugs to an extent or in a manner that is determined to impair the individual's ability to function in a responsible, professional manner.

C. Group Facilitators:

It is strongly recommended that facilitators have previous professional experience with case management, adolescents, the criminal justice system and group work.

3.4 CASE MANAGEMENT

Each program shall perform the administrative tasks associated with case management for each adolescent. These tasks include:

- A. Communication with probation as outlined in Section 3.1.C.
- B. At a minimum, parents/guardians must receive monthly reports regarding adolescents' attendance and participation in group sessions.

3.5 PARENT OUTREACH

The intent of the programs is to form partnerships between intervention programs, parents, the adolescent, and the community. Therefore, the following parent outreach is required by all programs:

- A. One orientation education session for parents/guardians. Private or separate orientation sessions shall be offered to parents/guardians who may be experiencing abuse from an intimate partner so that they may participate in the orientation free from fear of repercussion from their abuser. (These sessions may be offered to parents/guardians who disclose they are being abused, parents/guardians identified as experiencing abuse by the adolescent client, or at the program's discretion.) At a minimum, the orientation sessions should cover the following topics:
 - 1) definitions of dating/domestic violence and child abuse
 - 2) how to identify victims and perpetrators
 - 3) local resources where to go for help if they are victims of domestic or dating violence
 - 4) teen dating violence overview
 - 5) explanation of a restraining order
 - 6) sexual assault overview
 - 7) a statement regarding the effectiveness of perpetrator intervention

- 8) a discussion of the long-term consequences for perpetrators of dating/domestic violence
- 9) a discussion of same-sex intimate partner violence
- 10) specific concerns of battered immigrants and refugees
- 11) effects of witnessing dating/domestic violence on children.
- B. At minimum, one parent or guardian shall be required to complete an intake interview and an intake form.

INTERVENTION METHODOLOGY AND CURRICULUM

4.0 INTERVENTION METHODOLOGY

Program intervention methodology shall primarily consist of group sessions. The goals of the education and intervention program shall be the cessation of coercive, dominating and violent behavior, and the safety of victim(s), current partner(s) and family members.

- A. Composition of the groups shall be restricted to adolescent male perpetrators of violence against dating partners and/or female victims and those perpetrating violence against female relatives or household members.
- B. At a minimum, an adolescent shall attend a 12-hour program, with individual sessions of 1-2 hours in length. The intake interview sessions shall not be counted towards the 12 hours of required intervention.
- C. The maximum size of an intervention group will be limited to 10 adolescents

4.1 INAPPROPRIATE METHODS

Theories or methods which in any way bring the victim into the circle of responsibility for the adolescent perpetrator's behavior or diminish the adolescent perpetrator's responsibility for the violence are inappropriate. Used exclusively or as a focus, the following methods are dangerous to victims and are inadequate and inappropriate for adolescent perpetrator intervention:

A. psychodynamic individual or group therapy which centers causality of the violence in the past

- B. communication enhancement or anger management techniques which lay primary causality on anger
- C. systems theory approaches which treat the violence as a mutually circular process, blaming the victim
- D. addiction counseling models which identify the violence as an addiction and the victim and children as enabling or co-dependent in the violent drama
- E. family therapy or counseling which places the responsibility for adult behavior on the children
- F. gradual containment and de-escalation of violence
- G. theories or techniques which identify poor impulse control as the primary cause of the violence
- H. methods which identify psychopathology on either parties' part as a primary cause of violence
- I. fair fighting techniques or support group-style sessions
- J. theories or methods which promote couples counseling, peer mediation, mediation, or conflict resolution
- K. methods which allow facilitators to intimidate, control or scare adolescents
- L. didactic teaching methods or non-interactive groups
- M. athletic or recreational activities such as fishing trips, ropes courses, or field trips.

4.2 EDUCATIONAL COMPONENT

The curriculum shall minimally include:

- A. Identification, confrontation and change of abusive and controlling behaviors toward victims including partners, family members, caretakers and children. All forms of physical abuse and intimidation shall be identified and challenged. Specific attention to emotional, verbal, sexual and economic abuse shall be included.
- B. Identification and discussion of the effects of violence and abuse on victims. The adolescents shall be expected to take responsibility for

- creating these consequences; the exercises shall build empathy and take the perspective of the victims.
- C. Confronting excuses for abuse given by the adolescents. This shall include a philosophical stance that abuse is the sole responsibility and choice of the perpetrator; abuse is never justified.
- D. Identification and practice of cooperative and non-abusive forms of communication. Perpetrators are expected to learn non-abusive and responsible ways of treating peers, dates, partners, relatives and household members. Special attention should be paid to the difference between respectful and non-respectful interaction.
- E. Identification of cultural and social influences that contribute to abusive behavior without allowing these issues to excuse or justify individual responsibility for abuse.
- F. Identification of prescribed gender roles and stereotyping with special attention to the consequences of non-conformity.
- G. At least one session devoted to each of the following topics: substance abuse, decision-making skills, safe sex, parenting and weapons.

 Information should be presented which outlines the role that each play in violent situations

ADOLESCENT INTAKE AND EVALUATION

5.0 ADOLESCENT INTAKE

The program intake shall be used to determine whether the adolescent meets the admission criteria for adolescent perpetrator intervention services or whether other referrals are more appropriate. The program shall evaluate whether any adolescent should be required to engage in drug and alcohol, mental health or other intervention services while the individual is a participant in the program. Additionally, the program shall determine whether mandated reporting is required or recommended. (See Section 3.H above.)

- A. The program shall require the following information from the adolescent at intake:
 - 1) name, telephone number and address of the adolescent

- 2) name(s), telephone(s) and address(es) of parents/guardians
- 3) date of birth
- 4) school adolescent attends, grade level, name of guidance counselor
- 5) name and telephone number of probation officer (if applicable)
- 6) history of mental illness
- 7) history of disabilities, including learning disabilities and disorders
- 8) history of adolescent's violence towards and abuse of others
- 9) police reports
- 10) the adolescent's possession of and access to weapons
- 11) the adolescent's driver's license number
- 12) history of substance abuse
- 13) family history (e.g. of violence, substance use, mental health)
- 14) problems in parenting, if applicable
- the adolescent's signature on the service plan and all program releases
- B. Intake interviews shall be done individually, not as a group.
- C. The program shall require the following information from the parent(s) or guardian(s). Every attempt shall be made to obtain this information directly from the parent(s) or guardian(s):
 - 1) history of abuse towards family members perpetrated by adolescent
 - 2) history of other violence/abuse in the home
 - 3) a list of social service agencies with which the adolescent is involved.

- 4) In addition, the program shall obtain from one parent or guardian of the adolescent a parental release for the program to contact other agencies and service providers.
- D. The program shall require from the referral source:
 - 1) a description of the violent incident/high-risk behaviors warranting the referral and, if available,
 - a) any information about the history of abuse perpetrated by the adolescent
 - b) any available information about abuse sustained by the adolescent
- E. The program shall provide the referral source with information about services for victims including:
 - 1) the phone number of a local Jane Doe, inc.-affiliated hotline
 - 2) the phone number of a local battered women's shelter and/or rape crisis center with Jane Doe, inc. affiliation
 - 3) information about obtaining a restraining order
 - 4) information about the referral source's responsibility to report the incident to DSS or other authorities
 - 5) information about the closest support group for adolescent victims
- F. The program shall make every effort to initiate intervention within three weeks from the adolescent's initial contact with the program.

5.1 EVALUATION

- A. Through evaluation, programs may determine that individual adolescents need to receive collateral service while undergoing intervention for the perpetration of dating/domestic violence. Referrals to substance abuse treatment, counseling, study skills classes, employment training, and/or parenting classes may be deemed necessary and mandatory participation in these services may be incorporated into the service plan and agreement signed by the adolescent.
- B. At their discretion, programs may offer individual adolescents private intervention settings in addition to or in lieu of group sessions for reasons of special circumstances such as age. For non-English speakers and

individuals with disabilities, the program must offer the individuals the opportunity to participate in groups in an integrated setting but may offer the opportunity for private settings.

C. The on-going evaluation process shall concentrate on the adolescent's suitability for participation in the group sessions. If the adolescent is found to be unsuitable for participation in the intervention at any time, his probation officer, parents/guardians, and schools must be notified accordingly.

Data to be considered are the adolescent's:

- 1) attendance at sessions
- 2) cooperation with rules
- 3) participation
- 4) abstention from violence or abusive behavior

5.2 PROGRAM POLICIES, GROUP RULES AND ADOLESCENT-PROGRAM AGREEMENTS

- A. At a minimum, programs shall operate with the following policies and group rules in effect:
 - 1) Adolescents will not receive services or receive credit toward the 12-session program attendance requirement if they are under the influence of drugs or alcohol at any session.
 - 2) Adolescents who use drugs or alcohol must actively participate in substance abuse treatment during the period of time that they are participating in the dating/domestic violence intervention program.
 - 3) Any violence or threat of violence towards group facilitators will be reported immediately to the supervising probation officer and, if applicable, the referral source. The police will be called.
 - 4) Facilitators have a duty to warn criminal justice and mental health professionals if they have reason to believe that an adolescent poses an imminent threat of causing serious bodily harm to himself or others.
- B. A service plan and agreement specifying the responsibilities of both the program and the adolescent shall be signed once it is determined that the

adolescent is suitable for the program. Each adolescent must sign and agree to the terms of the service plan before being admitted to the perpetrator intervention program. The agreement shall, at a minimum, reflect:

- 1) the duration of intervention
- 2) an agreement to stop all forms of violence
- 3) appropriate waivers of confidentiality
- 4) the adolescent's agreement to receive collateral services such as mental health counseling, substance abuse treatment and other health interventions.

COMPLETING THE PROGRAM

6.0 CRITERIA FOR SUCCESSFUL PROGRAM COMPLETION

- A. The adolescent has completed the minimum 12-session program and has satisfied the requirements of the intervention contract.
- B. The adolescent has made progress towards accepting responsibility for abusive behavior, ceasing to blame his victims for his abusive behavior, and recognizing the adverse effects of his abusive acts.

6.1 UNSUCCESSFUL PROGRAM COMPLETION AND PROGRAM VIOLATIONS

- A. Program criteria for adolescent termination shall at a minimum include:
 - 1) threats made within the group
 - 2) violation of a restraining order
 - 3) violation of a condition of probation
 - 4) violation of a group rule or individual service plan and agreement
 - 5) any renewed acts of violent or controlling behavior
- B. Additionally, programs may terminate adolescents for absenteeism, lateness, or an unwillingness to cooperate.

- C. It is inappropriate to discharge adolescents because of a lack of parental participation.
- D. The program must report *any* non-compliance by an adolescent to the referring agency and, if applicable, his probation officer in a timely fashion that does not compromise the confidentiality or safety of the victim(s) or current partner(s).

PROGRAM MONITORING

7.0 PROGRAM MONITORING AND ASSESSMENT

The Department of Public Health shall monitor adolescent perpetrator intervention programs according to these Program Specifications.

- A. The monitoring and evaluation of programs shall include input from consumer groups including dating/domestic violence staff in District Attorneys' Domestic Violence Units, juvenile probation departments, courts, schools, DSS, DOE, DYS, the Community Task Forces, hospitals and battered women groups.
- B. Recognizing confidentiality limitations, programs selected by the Department of Public Health agree to cooperate with the Department of Public Health and the court in any evaluation process designed to assess compliance with the Program Specifications, the cessation of the incidents of dating/domestic violence, the recidivism of perpetrators, or other relevant topics.
- C. Programs shall provide the Department of Public Health with statistical information and other information as required by the Department of Public Health

7.1 SITE VISITS AND OBSERVATIONS

Authorized personnel of the Department of Public Health may conduct site visits and/or inspect adolescent perpetrator intervention programs at any reasonable time without prior notice. All parts of the program, all staff and activities, and all records are subject to such visit and inspection. A program's refusal to allow entry to the Department of Public Health, or a program's interference with Department of Public Health visits and/or inspections, shall be grounds for contract suspension or termination and/or termination of certification as a batterer intervention program.

7.2 OBSERVATION SUMMARY

After every site visit in which a violation of the Program Specifications is observed, or should non-compliance with these Program Specifications come to the attention of the Department of Public Health, the Department of Public Health shall prepare an Observation Summary, a copy of which shall be sent to the program. The Summary shall include a statement of the violations or deficiencies found, the provision(s) of the Program Specifications relied upon, and a reasonable period of time for correction.

7.3 PLAN OF CORRECTION

- A. A program shall submit to the Department of Public Health a written plan for correction of violations cited in an Observation Summary within ten (10) days of receipt of the Summary.
- B. Every plan of correction shall set forth, with respect to each deficiency, the specific corrective step(s) to be taken, a timetable for such steps, and the date by which compliance with the Program Specifications will be achieved. The timetable and the compliance dates shall be consistent with achievement of compliance in the most expeditious manner possible.
- C. The Department of Public Health shall review the plan of correction for compliance with the Program Specifications and shall notify the program of either the acceptance or rejection of the plan. An unacceptable plan must be amended and resubmitted within five (5) days of notice.